

**COURSE APPLICATION FORM 2009 – 2010**

**MONTESSORI CLASSROOM ASSISTANTS' COURSE**

Toronto

**MONTESSORI EARLY CHILDHOOD DIPLOMA COURSE**

Toronto

**MONTESSORI ELEMENTARY DIPLOMA COURSE – PART 1 (6 TO 9 years)**

Toronto

**(Check the locations, addresses and dates on our website at [www.montessoriteacherscollege.com](http://www.montessoriteacherscollege.com))**

**Contact Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

email Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer: \_\_\_\_\_

**Emergency Contact**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Related Background Information**

Academic Qualifications: \_\_\_\_\_

Professional Qualifications: \_\_\_\_\_

Experience with Children: \_\_\_\_\_

***I agree that the above information is correct,***

***Signature of Applicant:*** \_\_\_\_\_ ***Date:*** \_\_\_\_\_

***Remember to keep a copy, including the Application Checklist, Schedule of Fees, Cancellation and Refund Policies for your records.***

